ASHTABULA TOWNSHIP ZONING OFFICE 2718 North Ridge Road East Ashtabula, OH 44004 APPLICATION FOR SIGN PERMIT

Application Nu	ımber:		Receipt Number:				
				Cost: \$			
This applicatio	n must be comple	ete and accurate or a	permit will	not be issued.	Complete one		
application for	each sign. PLEAS	SE PRINT LEGIBLY.					
<u>LOCATION</u> ZO		ZONING		NAME OF			
ADDRESS:		DISTRICT:		BUSINESS:			
TYPE OF SIGN:							
Permanent		Temporary		From:	To:		
Front Wall		Side Wall		Free Standing_			
Directional		Illuminated		Alteration, Addition or Repair to			
				Existing Sign			
DIMENSIONS:		also be shown on atta					
Location:		(Distance from Right-					
	Side Setback:	(Distance from Right-	-of-Way				
		Or Property Line):					
Overall Sigh He	eight:						
Sign Face:	Horizontal	Vertical		Area:		_sq. ft.	
	Dimensions:	Dimension	ıs:	(One face	e only if Free S	Standing)	
TOTAL SITE SIG							
Width of Building Front Wall:							
			Drawings or sketches of the				
				locations and dimensions of all			
Total Area:							
					ed as part of a	pplication.	
How is sign sed	cured or anchore	d:					
OWNED OF CICA	d.						
OWNER OF SIGN	<u>N:</u>						
NAME		ADDRESS	ZIP	P	PHONE		
Contact Person:							
Other Remarks:							
APPLICANT:		REPRESENT	ING:				
WITNESS:							
VVIIINLJJ.							
Date filed with 2	Zoning Inspector:						